PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Filer

Lacil question in this part must be answered and the appropriate schedu		able liability (more than \$10,000) during the reporting period? If yes, complete and attach Schedule III.	If yes, complete and attach Schedule II. III. Did von your sponse or a dependent shift began at the period?	II. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable accept with 200 in the reporting period or hold any	fees) of \$200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	. Did voll or voll spouse have "carpod" income /
answered		Yes	Yes X	3	Yes X	
and the a		N N	5]	N _S	
ppropriate schedule attached for each "Yes" response.	The sum name of sentence At	No XI. Did you receive compensation of more than \$5,000 from a single source in the two prior years? If yes, complete and attach School in Vi	If yes, complete and attach Schedule V.	V. Did you have any reportable agreement or arrangement	IV. Did you hold any reportable positions on or before the date of filing in the current calendar year or in the prior two years? If yes, complete and attach School by IV.	
esponse.		Yes	Yes		Yes 🗍	
		<u></u>			S □	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics. TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? Yes Yes S X <u>₹</u>

SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name Hodney Blum

Page

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below.

Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

									American Irust; Savings Bank	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Harris County, Texas Public Schools	-	First Bank & Trust, Houston, TX	XYZ Corporation, Houston, TX	Source (include date of receipt for honoraria)	
									Directors Fee	epono onaly	Sported Salary	Ulrector's Fee	Salary		Type	
									13850	NA	0	\$400	\$6,300	Current Year to Filing	Am	The Social Occulty Act.
									13850	NA	\$1,000	\$3,200	\$28,450	Preceding Year	Amount	Security Act.

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(0/01	1010	Scins	2007	887	4		- Sun pico.	Examples:	homes and vacation homes and vacation homes and vacation homes and vacation homes sing \$5,000 or less in accounts; and any fill derived from, a federa the Thrift Savings Plan. If you so choose, you income source is that cent child (DC) or is joint the optional column on For a detailed discussic please refer to the instr	For an ownership in that is not publicly ness, the nature colocation in Block A.	For rental or other real proprovide a complete address.	Asset and/or II dentify (a) each asset held if of income with a fair market the end of the reporting if reportable asset or sources more than \$200 in "unearne Provide complete names o (do not use ticker symbols). (do not use ticker symbols). For all IRAs and other retire plans) that are self-directed have the power, even if not is office investments), provide th in the account that in the accounts office only the name of provide only the name of the contraction of the source of the sour
stock of	Stock	STE of Hothanay	Stock NonKeal	Corp. Stock	٠,	American Trust	Tet Bank of Bad and IV	SP Mega Corp. Stock	Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in personal checking or savings accounts; and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held with your spouse (JT), in the optional column on the far left. For a detailed discussion of Schedule III requirements, please refer to the instruction booklet.	For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.	For rental or other real property held for investment, provide a complete address.	Asset and/or Income Source Identity (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in "unearned" income during the year. Provide complete names of stocks and mutual funds (do not use ticker symbols). For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the
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SCHEDULE II — ASSETS AND "UNEARNED" INCOME Continuation Sheet (if needed)

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SCHEDULE II — ASSETS AND "UNEARNED" INCOME

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SCHEDULE III — LIABILITIES

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owed during the reporting period. Exclude: Any mortgage on your personal residence (unless there is rental income); loans secured by automobiles, household furni-Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount ture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report revolving charge accounts (i.e., credit cards) only if the balance at the close of the previous calendar year exceeded \$10,000.

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Date Liability Type of Liability A B C D E F G H
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SCHEDULE IV — POSITIONS

prise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. cer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enter-Report all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year and in the two prior years as an offi-

Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as a political party or campaign organization);

Partner Bedrick Development	Partner Doppio Gin	Partner Salto de Fado	C.E.O. Digital Canal Corporation	Position	The state of the s
opment			orporation	Name of Organization	

Use additional sheets if more space is required.

SCHEDULE V — AGREEMENTS

Name Roday Blum

Page 7 of

	efit plan maintained by a former employer.	service; continuation or deferral of payments by a former or current employer. It will respect to: future employment; a leave of a	Identify the date, parties to, and general terms of any agreement or arrangement and arrangement of arrangement
- Italy on the state of the sta	continuing participation in an employee welfare or bon	nt; a leave of absence during	

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SCHEDULE VI — COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of such compensation received by you or your business affiliation for services provided directly by you during the two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise, or any nonprofit organization if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. Government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information listed on Schedule I.

GPO: 2011 67-766 (mac)		(NONE		Example: Doe Jones & Smith, Hometown, Homestate	Source (Name and Address)
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